Antimicrobial Resistance Surveillance for Human Health in Michigan

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Surveillance for Healthcare-Associated and Resistant Pathogens (SHARP) Unit Michigan Department of Health and Human Services

Antimicrobial Resistance Surveillance Data Sources at MDHHS

- Mandatory Public Health Communicable Disease Reporting
- Voluntary Reporting Initiatives and Isolate Submission

Mandatory Public Health Communicable Disease Reporting

Reportable Conditions in Michigan

- Reporting is required by Michigan law
 - Michigan Public Health Act No. 368 Communicable Disease Rules: R 325.171-3, 333.5111
- 80+ conditions/organisms
- Plus the unusual occurrence, outbreak, or epidemic of any disease, condition, or healthcare-associated infection
- Some conditions/organisms require an isolate or specimen submission to MDHHS Bureau of Laboratories
- Reports can be made using the webbased Michigan Disease Surveillance System (MDSS)

REPORTABLE DISEASES IN MICHIGAN – BY CONDITION

A Guide for Physicians, Health Care Providers and Laboratories

Report the following conditions to the Michigan Disease Surveillance System (MDSS) or local health department (see reverse) within 24 hours (unless otherwise noted) if the agent is identified by clinical or laboratory diagnosis.

Report the unusual occurrence, outbreak or epidemic of any disease or condition, including healthcare-associated infections.

Acute flaccid myelitis (1)

Anaplasmosis (Anaplasma phagocytophilum)

Anthrax (Bacillus anthracis and B. cereus serovar anthracis) (4)

Arboviral encephalitides, neuro- and non-neuroinvasive:

Chikungunya, Eastern Equine, Jamestown Canyon, La Crosse,

Powassan, St. Louis, West Nile, Western Equine, Zika (6)

Babesiosis (Babesia microti)

Blastomycosis (Blastomyces dermatitidis)

Botulism (Clostridium botulinum) (4)

Brucellosis (Brucella species) (4) Campylobacteriosis (Campylobacter species)

Candidiasis (Candida auris) (4)

Carbapenemase Producing - Carbapenem Resistant

Enterobacteriaceae (CP-CRE): Klebsiella spp., Enterobacter spp., and

Escherichia coli (5)

Chancroid (Haemophilus ducrevi)

Chickenpox / Varicella (Varicella-zoster virus) (6)

Chlamydial infections (including trachoma, genital infections,

LGV) (Chlamydia trachomatis) (3, 6)

Cholera (Vibrio cholera) (4)

Coccidioidomycosis (Coccidioides immitis)

Cryptosporidiosis (Cryptosporidium species)

Cyclosporiasis (Cyclospora species) (5)

Dengue Fever (Dengue virus)

Diphtheria (Corynebacterium diphtheriae) (5)

Ehrlichiosis (Ehrlichia species)

Encephalitis, viral or unspecified

Escherichia coli, O157:H7 and all other Shiga toxin positive serotypes (5)

Giardiasis (Giardia species)

Glanders (Burkholderia mallei) (4)

Gonorrhea (Neisseria gonorrhoeae) (3, 6)

Guillain-Barre Syndrome (1)

Haemophilus influenzae, sterile sites only-submit isolates for serotyping for patients < 15 years of age (5)

Hantavirus

Hemolytic Uremic Syndrome (HUS)

Hemorrhagic Fever Viruses (4)

Hepatitis A virus (Anti-HAV IgM, HAV genotype)

Hepatitis B virus (HBsAg, HBeAg, anti-HBc IgM, HBV NAAT, HBV genotype; report all HBsAg and anti-HBs (positive, negative,

indeterminate) for children ≤ 5 years of age) (6)

Hepatitis C virus (all HCV test results including positive and negative antibody, RNA, and genotype tests) (6)

Histoplasmosis (Histoplasma capsulatum)

HIV (tests including reactive immunoassays (e.g., Ab/Ag, TD1/TD2, WB, EIA, IA), detection tests (e.g., VL, NAAT, p24, genotypes), CD4 counts/percents, and all tests related to perinatal exposures) (2,6)

Influenza virus (weekly aggregate counts)

Pediatric influenza mortality, report individual cases (5) Novel influenza viruses, report individual cases (5,6)

Kawasaki Disease (1)

Legionellosis (Legionella species) (5)

Leprosy or Hansen's Disease (Mycobacterium leprae)

Leptospirosis (Leptospira species)

Listeriosis (Listeria monocytogenes) (5,6)

Lyme Disease (Borrelia burgdorferi)

Malaria (Plasmodium species)

Measles (Measles/Rubeola virus)

Melioidosis (Burkholderia pseudomallei) (4)

Meningitis: bacterial, viral, fungal, parasitic and amebic

Meningococcal Disease (Neisseria meningitidis, sterile sites) (5)

Middle East Respiratory Syndrome (MERS-CoV) (5)

Mumps (Mumps virus)

Orthopox viruses, including: Smallpox, Monkeypox (4)

Pertussis (Bordetella pertussis)

Plague (Yersinia pestis) (4)

Polio (Poliovirus)

Prion disease, including CJD

Psittacosis (Chlamydophila psittaci)

Q Fever (Coxiella burnetii) (4)

Rabies (Rabies virus) (4)

Rabies: potential exposure and post exposure prophylaxis (PEP)

Rubella (Rubella virus) (6) Salmonellosis (Salmonella species) (5)

Severe Acute Respiratory Syndrome (SARS) (5)

Shigellosis (Shigella species) (5)

Spotted Fever (Rickettsia species)

Staphylococcus aureus, vancomycin intermediate/

resistant (VISA (5)/VRSA (4))

Streptococcus pneumoniae, sterile sites

Streptococcus pyogenes, group A, sterile sites, including

Streptococcal Toxic Shock Syndrome (STSS)

Syphilis (Treponema pallidum) (6)

Tetanus (Clostridium tetani)

Toxic Shock Syndrome (non-streptococcal) (1)

Trichinellosis (Trichinella spiralis)

Tuberculosis (Mycobacterium tuberculosis complex);

report preliminary and final rapid test and culture results (4)

Tularemia (Francisella tularensis) (4)

Typhoid Fever (Salmonella typhi) and Paratyphoid Fever (serotypes Paratyphi A, Paratyphi B (tartrate negative), and Paratyphi C) (5)

Vibriosis (Non-cholera vibrio species) (5)

Yellow Fever (Yellow Fever virus)

Yersiniosis (Yersinia enterocolitica)

LEGEND

- (1) Reporting within 3 days is required.
- (2) Reporting within 7 days is required.
- (3) Sexually transmitted infection for which expedited partner therapy is authorized. See www.michigan.gov/hivstd for details.
- (4) A laboratory shall immediately submit suspect or confirmed isolates, subcultures, or specimens from the patient being tested to the MDHHS Lansing laboratory.
- (5) Isolate requested. Enteric: If an isolate is not available from nonculture based testing, the positive broth and/or stool in transport medium must be submitted to the MDHHS Lansing laboratory. Respiratory: Submit specimens, if available.
- (6) Report pregnancy status, if available.

Blue Bold Text = Category A bioterrorism or select agent, notify the MDHHS Laboratory immediately: (517) 335-8063

Antimicrobial Resistant Reportable Conditions

- Vancomycin Intermediate/Resistant Staphylococcus aureus (VISA/VRSA)
- Carbapenem-producing, carbapenem-resistant Enterobacteriaceae (CP-CRE)
- Candida auris
- Unusual occurrence, outbreak, or epidemic

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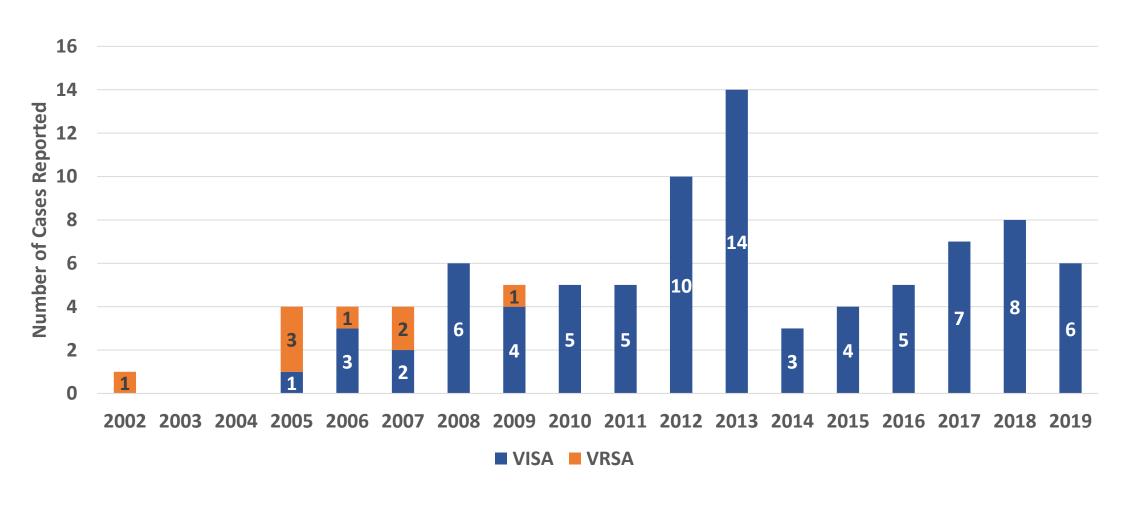
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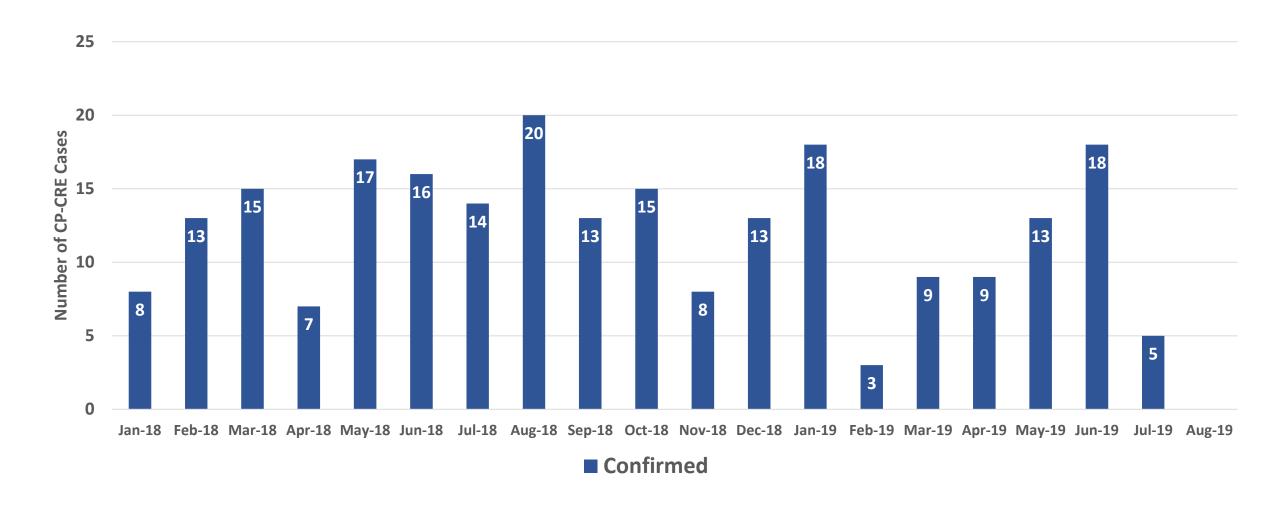
https://www.michigan.gov/cdinfo

VISA and VRSA Cases Reported to MDSS



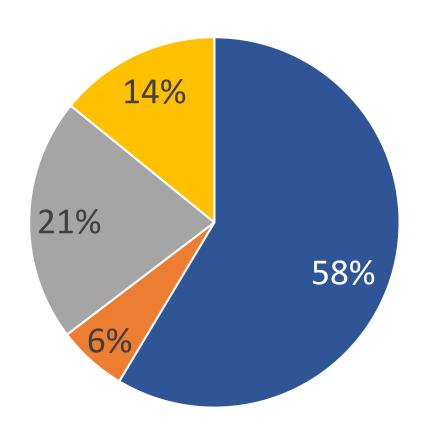
Confirmed CP-CRE Cases Reported to MDSS

Jan 2018 - Aug 6, 2019



Confirmed CP-CRE by Species

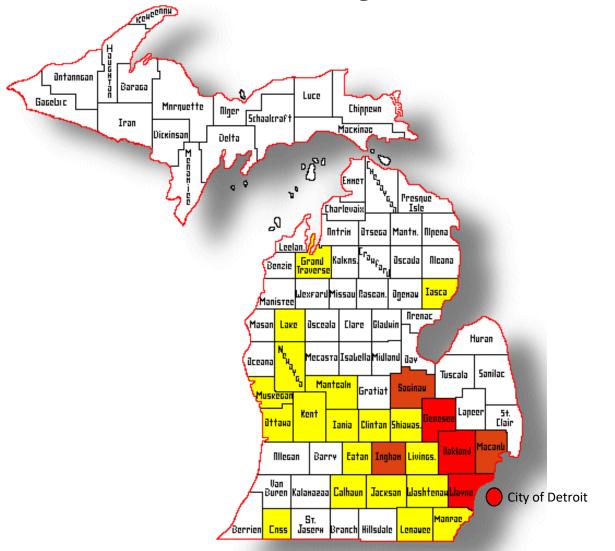
Jan 2018 - Aug 6, 2019

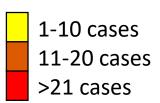


- Klebsiella pneumoniae
- Klebsiella spp not pneumoniae
- Enterobacter cloacae
- Escherichia coli

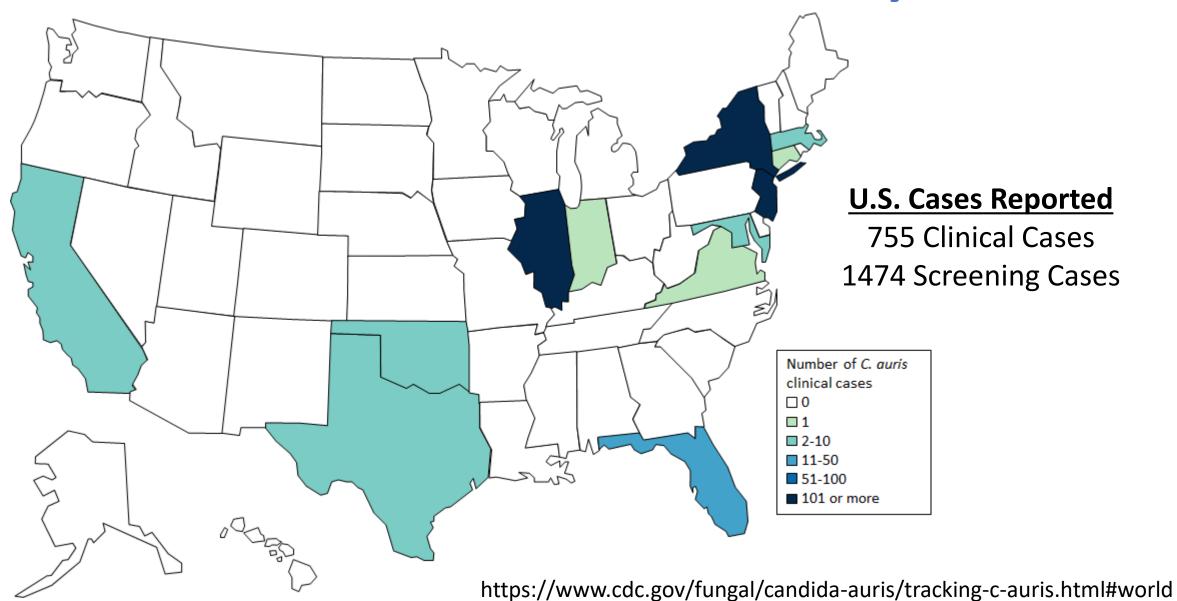
Confirmed CP-CRE Cases by County

Jan 2018 – Aug 6, 2019





Clinical Cases of Candida auris, July 2019



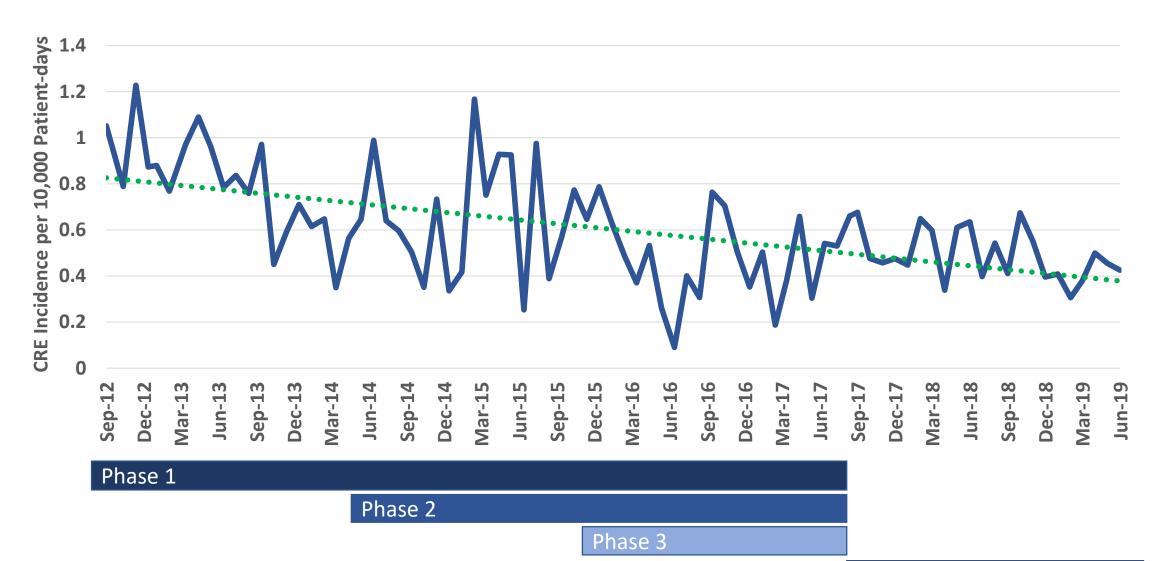
Voluntary Reporting Initiatives & Isolate Submission

CRE Surveillance and Prevention Initiative

Voluntary Participation

	Beginning	End	Acute Care	LTAC	LTC/SNF	Total
Phase 1	Sept 2012	Aug 2014	17	4	0	21
Phase 2	Mar 2014	Feb 2016	7	2	0	9
Phase 3	Sept 2015	Aug 2017	4	4	2	10
New facilities	Sept 2017	Aug 2019	14	7	0	21
Combined Cohort	Sept 2017	Aug 2019	42	17	2	61

CRE Incidence – All Facilities

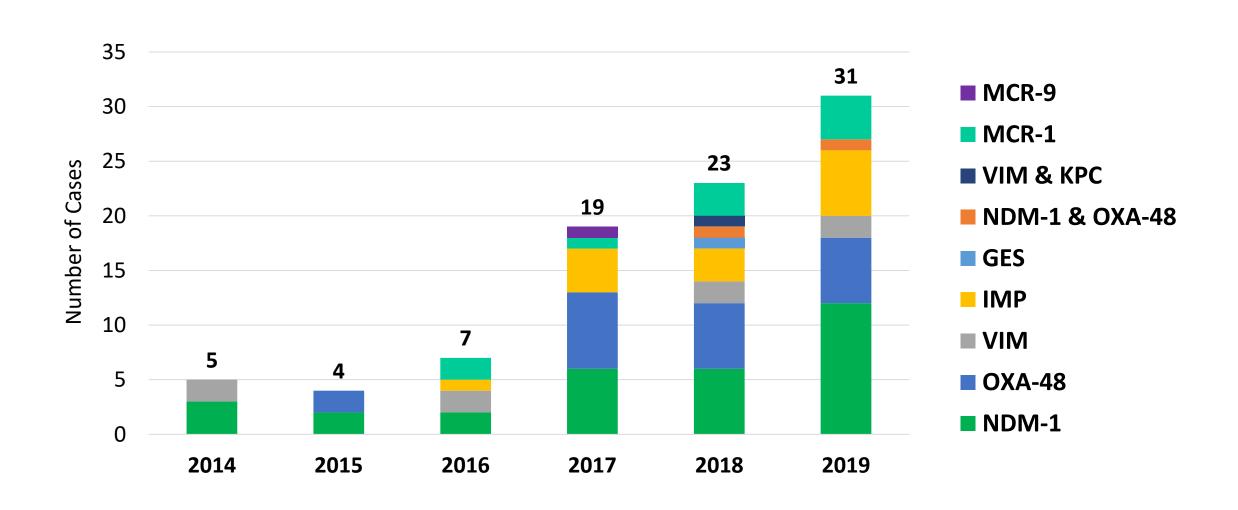


Combined Cohort

Antimicrobial Resistant Isolate Submission MDHHS Bureau of Laboratories

- Laboratories are strongly encouraged to voluntarily submit isolates of Enterobacteriaceae, Pseudomonas aeruginosa, and Acinetobacter spp. that are:
 - Non-susceptible to carbapenems
 - Resistant to colistin
 - Pan non-susceptible

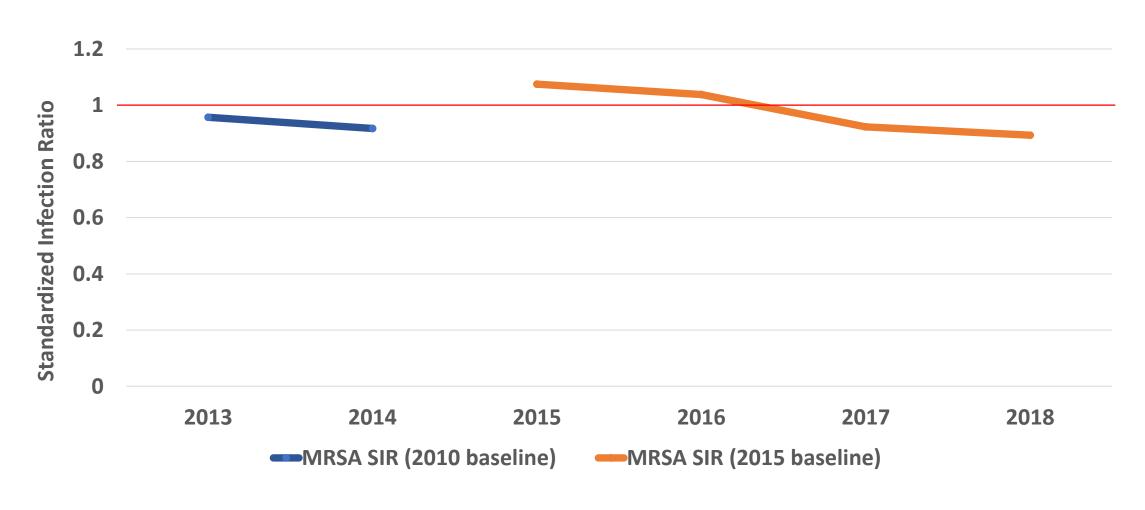
Confirmed Unusual Resistance Cases



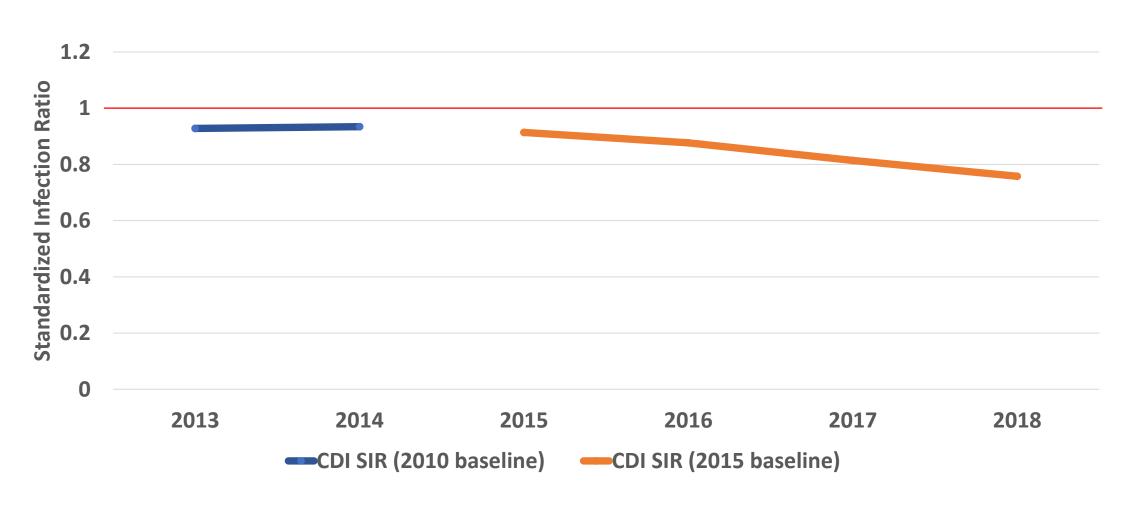
National Healthcare Safety Network Healthcare-Associated Infection Reporting

- NHSN is CDC's web-based surveillance program for HAI tracking
- Healthcare facilities can voluntarily share the following data with SHARP:
 - Central Line-Associated Blood Stream Infection (CLABSI)
 - Surgical Site Infection (SSI)
 - Catheter-Associated Urinary Tract Infection (CAUTI)
 - Ventilator-Associated Events (VAE)
 - MRSA LabID surveillance
 - Clostridioides difficile LabID surveillance
 - Antimicrobial Use and Antimicrobial Resistance

Laboratory Identified MRSA Bacteremia Standardized Infection Ratios

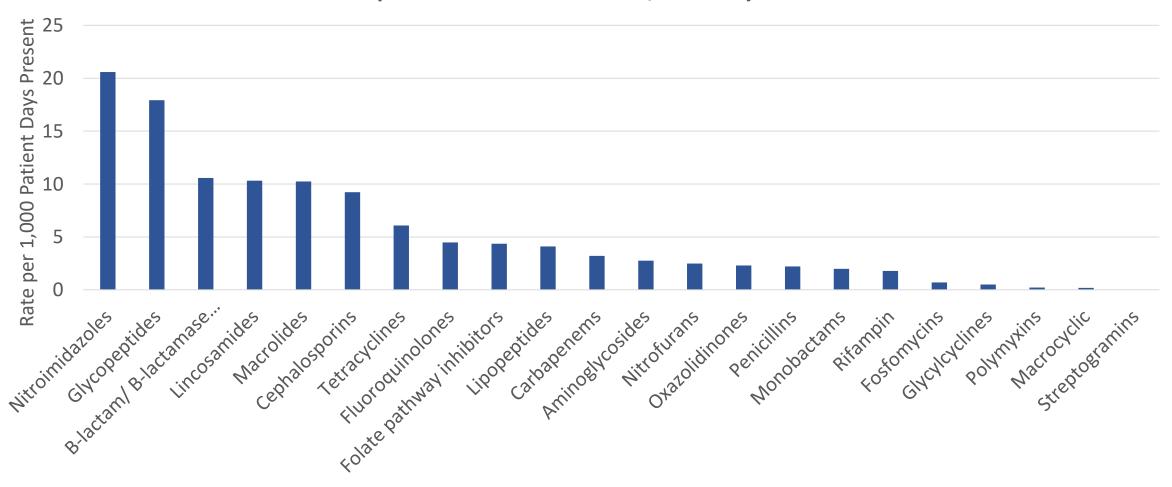


Laboratory Identified *Clostridioides difficile* (CDI) Standardized Infection Ratios (SIR)



NHSN Antimicrobial Use Rates by Class

Inpatient Antimicrobial Use, Jan - July 2019



Thank You

Surveillance for Healthcare Associated and Resistant Pathogens (SHARP) Unit Michigan Department of Health and Human Services (MDHHS) (517) 335-8165



